

US EPA ARCHIVE DOCUMENT

Contest Entry Form

EPA CARE Video Contest Entry Form

(One entry form per video)

Full Name:

Email:

Phone:

Street Address:

Street Address 2:

City:

State:

Zip:

Video Title (unique name):

YouTube User Name:

YouTube URL

Has the video been uploaded to the contest page?

Date video was uploaded.

How did you hear about the contest?

Are you, or a member of your immediate family, an EPA employee, contractor, or EPA CARE grantee?

Do you agree to the Rules? (hyperlink)

Age:

Parent/Guardian Full Name (if under 18)

Parent/Guardian Email:

Parent/Guardian Phone:

I have obtained permission from all parents/guardians for minor present in the video and have submitted a completed contest permission form (Hyperlink) (“yes” or “Not Applicable”).